

**APPLICATION FOR PRESENTATION OF STATE FLAG TO MEMBERS OF THE MILITARY OR  
PUBLIC SAFETY OFFICIALS WHO DIE IN THE LINE OF DUTY**

**Person Submitting Request:**

Last Name	First Name	Middle Initial	Telephone
Street Address	City Name	State	Zip Code

Name of Deceased	Agency	Circumstances (Newspaper Clipping Acceptable)
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**To Be Presented to:**

Last Name	First Name	Middle Initial	Telephone
Street Address	City Name	State	Zip Code

**Relationship:** \_\_\_\_\_

**Mail to:**

Honorary Flag Request  
C/O Executive Director  
Indiana Department of Homeland Security  
302 West Washington Street, Room E-208  
Indianapolis, IN 46204

Fax: 317-232-3895